Approved for use through 04/30/2003. OMB 0551-0032 U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.																	
			ey Docket		3517.1												
<u> </u>			First Inventor Shah et al.														
TRANSMITTAL			Custom Design Method for Resequencing Arrays														
(Only for ne	ew nonprovisional applications under 37 C.F.R. 1.53(b))	Expres	ss Mail Lai	bel No.	EV 187 574 657 US												
APPLICATION ELEMENTS ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Boy 1450																	
	hapter 600 concerning utility patent application contents.		DUNE	33 1	P.O. Box 1450 Alexandria VA 22313-1450												
	ee Transmittal Form (e.g., PTO/SB/17) Submit an original and a duplicate for fee processing)	7			or CD-R in duplicate, large table or r Program (<i>Appendix</i>)												
2. 🔲 A	Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission																
3. 🛛 S	See 37 CFR 1.27. (if applicable, all necessary) Specification [Total Pages 47] a. Computer Readable Form (CRF)																
- "1	referred arrangement set forth below) Descriptive title of the Invention		i. 🔲 :	CD-RO	n Sequence Listing on: DM or CD-R (2 copies); or												
Cross Reference to Related Applications Statement Regarding Fed sponsored R & D				paper tateme	ents verifying identity of above copies												
1 (Reference to sequence listing, a table, or a computer program listing appendix				MPANYING APPLICATIONS PARTS												
- [Background of the Invention Brief Summary of the Invention			Assignr	ment Papers (cover sheet & document(s))												
- (Brief Description of the Drawings (if filed) Detailed Description	10			.R. 3.73(b) Statement Power of there is an assignee) Attorney												
- Claim(s) - Abstract of the Disclosure			11. English Translation Document (if applicable)														
4. 🛭 Dı	rawing(s) (35 U.S.C.113) [Total Sheets 1] 12			ation Disclosure												
5. Oath or Declaration [Total Sheets]					ent (IDS)/PTO-1449 Citations inary Amendment												
a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			14. ☐ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35														
									6. Application Data Sheet. See 37 CFR 1.76			or its equivalent.					
									18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: □ Continuation □ Divisional □ Continuation-in-part (CIP) of prior application No:/								
									Prior application information: Examiner Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
19. CORRESPONDENCE ADDRESS																	
☐ Customer Number or Bar Code Label 22886 or ☐ Correspondence address below																	
(Insert Customer No. or Attach bar code label here)																	
Name																	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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State

Telephone

Sandra E. Wells

Zip Code

Date

Registration No. (Attorney/Agent)

52,349

September 9, 2003

Address

Country

Signature

Name (Print/Type)

City

CCC TO A NOMITTAL	Complete if Known			
FEE TRANSMITTAL	Application Number	TBA		
for FY 2003	Filing Date	9/9/03		
Filtration of McMoon. Details for a marking the second and delay	First Named Inventor	Shah et al.		
Effective 01/01/2003. Patent fees are subject to annual revision.	Examiner Name	TBA		
☐ Applicant claims small entity status. See 37 CFR 1.27	Art Unit	ТВА		
TOTAL AMOUNT OF PAYMENT (\$) 750	Attorney Docket No.	3517.1		

TOTAL AMOU	Attorney Docket No.			3517.1			
MET	T			FEE C	ALCULATION (continued)		
	3. ADDITIONAL FEES						
Check CC	Large	Large Entity Small Entity					
Order Deposit Account:			Fee	Fee	Fee		
Deposit		Fee Code	(\$)	Code	(\$)	Fee Description	Fee Paid
Account	01-0431		130	2051	65	Surcharge - late filing fee or oath	
Number			50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit	Affymetrix, Inc.		130	1053	130	Non-English specification	
Account Name			2,520	1812	2,520	For filing a request for reexamination	
The Director is au	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
☐ Charge fee(s) is	1251	110	2251	55	Extension for reply within first month		
to the above-identi	ified deposit account. FEE CALCULATION	1252	410	2252	205	Extension for reply within second	
		1253	930	2253	465	month Extension for reply within third month	
1. BASIC FILI	1254	1,450	2254	725	Extension for reply within fourth		
	Small Entity iee Fee Fee Description	1.2.	7,100		720	month	
	Code (\$) Fee Paid	1255	1,970	2255	985	Extension for reply within fifth month	L
1001 750 2	001 375 Utility filing fee 750	1401	320	2401	160	Notice of Appeal	
1002 330 2	002 165 Design filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1003 520 2	003 260 Plant filing fee	1403	280	2403	140	Request for oral hearing	
	004 375 Reissue filing fee 005 80 Provisional filling fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160 2005 80 Provisional filling fee			110	2452	55	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 750			1,300	2453	650	Petition to revive – unintentional	
		1501	1,300	2501	650	Utility issue fee (or reissue)	
2. EXTRA CLAIM		1502	470	2502	235	Design issue fee	
	Extra Fee from Fee Claims below Paid	1503	630	2503	315	Plant issue fee	
Total Claims 20	-20 ** = 0 X 18 = 0	1460	130	1460	130	Petitions to the Commissioner	
Independent		1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Ciains	-3 ** = 0 X 84 = 0	1806	180	1806	180	Submission of Information Disclosure Stmt	1
Multiple Dependent	X = 0	8021	40	8021	40	Recording each patent assignment per property (times number of	
Large Entity	Small Entity	1	į			properties)	
Fee Fee Code (\$)	Fee Fee <u>Fee Description</u> Code (\$)	1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18	2202 9 Claims in excess of 20	1810	750	2810	375	For each additional invention to be	
1201 84	2201 42 Independent claims in excess of 3	1	1			examined (37 CFR § 1.129(b))	
1203 280	2203 140 Multiple dependent claim, if not paid	1801	750	2801	375	Request for Continued Examination (RCE)	
1204 84	2204 42 ** Reissue independent claims over original patent	1802	2 900 1802 900 Request for expedited examination of a design application				
1205 18	2205 9 "Reissue claims in excess of 20 and over original patent	nd or a design application Other fee (specify)					
SUBTOTAL (2) (\$) 0							
*Reduced by Bo					Fee Pa	aid SUBTOTAL (3) (\$) 0	
**or number previously paid, if greater; For Reissues, see above							

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	Sandra E. Wells	Registration No. Attorney/Agent)	52,349	Telephone	408-731-5000		
Signature	Sandra E	Well		Date 9 9 13	September 9, 2003		

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